

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Democratic Party of Illinois

ADDRESS (number and street)

P.O. Box 518

☐Check if different  
than previously  
reported. (ACC)

Springfield

IL

62705

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00167015

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report (Q1)☐July 15  
Quarterly Report (Q2)☐October 15  
Quarterly Report (Q3)☐January 31  
Quarterly Report (YE)☐July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☒

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

03

01

2006

through

03

31

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Michael Kasper

Signature of Treasurer

Electronically Filed by Michael Kasper

Date

04

19

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Democratic Party of Illinois

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2006</span>		1524261.64
(b) Cash on Hand at Beginning of Reporting Period .....	1539969.76	
(c) Total Receipts (from Line 19) .....	5129.87	26737.08
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	1545099.63	1550998.72
7. Total Disbursements (from Line 31) .....	28437.05	34336.14
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1516662.58	1516662.58
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name  
Democratic Party of Illinois

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	1750.00	1750.00
(i) Itemized (use Schedule A) .....	1862.00	2100.50
(ii) Unitemized .....	3612.00	3850.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	0.00	0.00
(b) Political Party Committees .....	0.00	16372.75
(c) Other Political Committees (such as PACs) .....	0.00	
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➡	3612.00	20223.25
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	1517.87	6513.83
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	1517.87	6513.83
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	5129.87	26737.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	3612.00	20223.25

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	639.39	1524.24
(ii) Non-Federal Share.....	3623.22	8637.46
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	4262.61	10161.70
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	20124.44	20124.44
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	4050.00	4050.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	4050.00	4050.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	28437.05	34336.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	24813.83	25698.68

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	3612.00	20223.25
34. Total Contribution Refunds (from Line 28(d)) .....	4050.00	4050.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	-438.00	16173.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	639.39	1524.24
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	639.39	1524.24

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Party of Illinois

A. Full Name (Last, First, Middle Initial)

Mrs. Susan Adler

Mailing Address 161 E Chicago Ave Apt 35E

City State Zip Code  
 Chicago IL 60611

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 8 / 2 0 0 6

Transaction ID: SA11A1.21531

Amount of Each Receipt this Period

237.50

IL Party Victory Fund

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)

Allen & Vicki Bonnell

Mailing Address 573 Meadow Ln

City State Zip Code  
 Dixon IL 61021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DHS MABLEY CENTER

Occupation  
Reimbursement Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 8 / 2 0 0 6

Transaction ID: SA11A1.21548

Amount of Each Receipt this Period

285.00

IL Party Victory Fund

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)

KAREN CROTTY

Mailing Address 709 MOUNTAIN RD

City State Zip Code  
 LAKE BLUFF IL 60044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 8 / 2 0 0 6

Transaction ID: SA11A1.21553

Amount of Each Receipt this Period

285.00

IL Party Victory Fund

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Party of Illinois

**A.** Full Name (Last, First, Middle Initial)

Dirk Degenaars

Mailing Address 723 Cummings

City State Zip Code  
 Kenilworth IL 60043

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Transwestern

Occupation  
Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 8 / 2 0 0 6

Transaction ID: SA11A1.21546

Amount of Each Receipt this Period

213.75

IL Party Victory Fund

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)

Democratic National Committee

Mailing Address 430 South Capitol Street, S.E.

City State Zip Code  
 Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.21554

Amount of Each Receipt this Period

23860.36

IL Party Victory Fund Uni-  
temized

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)

Mr. Jeffrey I Dennis

Mailing Address 1370 shagbark drive

City State Zip Code  
 des plaines IL 60018

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.21532

Amount of Each Receipt this Period

237.50

IL Party Victory Fund

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Party of Illinois

**A.** Full Name (Last, First, Middle Initial)  
Gwen Friedow  
Mailing Address 1044 S Madison Ave

City State Zip Code  
La Grange IL 60525

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Schafer Condon Carte

Occupation  
Advertising

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 8 / 2 0 0 6

Transaction ID: SA11A1.21550

Amount of Each Receipt this Period

237.50

IL Party Victory Fund

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
David Hartman  
Mailing Address 6137 North Bernard Street

City State Zip Code  
Chicago IL 60659

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self employed

Occupation  
Self employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 3 / 2 0 0 6

Transaction ID: SA11A1.21588

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
Leo Hennessy  
Mailing Address 812 Havenshire Rd.

City State Zip Code  
Naperville IL 60565-6187

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of Illinois

Occupation  
Arbitrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 8 / 2 0 0 6

Transaction ID: SA11A1.21538

Amount of Each Receipt this Period

285.00

IL Party Victory Fund

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Party of Illinois

<b>A.</b> Full Name (Last, First, Middle Initial) Enid Kaplan Mailing Address 100 Sheridan Road City State Zip Code Highland Park IL 60035-5358 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Self Employed Self Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>1000.00</div>		Date of Receipt <div>03 / 23 / 2006</div> <b>Transaction ID:</b> SA11A1.21586 Amount of Each Receipt this Period <div>1000.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Gayle Klam Mailing Address 36 Pinewood Dr City State Zip Code Carbondale IL 62901 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>.00</div>		Date of Receipt <div>03 / 08 / 2006</div> <b>Transaction ID:</b> SA11A1.21534 Amount of Each Receipt this Period <div>237.50</div> IL Party Victory Fund <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Keith T Lamb Mailing Address 19140 W 6000S Rd City State Zip Code Cabery IL 60919 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation SELF EMPLOYED Retired Farmer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>.00</div>		Date of Receipt <div>03 / 08 / 2006</div> <b>Transaction ID:</b> SA11A1.21540 Amount of Each Receipt this Period <div>555.75</div> IL Party Victory Fund <b>[MEMO ITEM]</b>

SUBTOTAL of Receipts This Page (optional) .....

1000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Party of Illinois

**A.** Full Name (Last, First, Middle Initial)  
Michael McClain  
Mailing Address 1100 Peach Tree

City State Zip Code  
Quincy IL 62301-9008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
McClain & Adams

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 6

Transaction ID: SA11A1.21551

Amount of Each Receipt this Period

1425.00

IL Party Victory Fund

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
Mr. Sidney L Port  
Mailing Address 1666 E Touhy Ave

City State Zip Code  
Des Plaines IL 60018

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lawson Products Inc.

Occupation  
Chairman Of Excutive Committee

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 0 / 2 0 0 6

Transaction ID: SA11A1.21537

Amount of Each Receipt this Period

950.00

IL Party Victory Fund

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
William M Rintz  
Mailing Address 1024 S Oak St

City State Zip Code  
Hillsboro IL 62049

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 8 / 2 0 0 6

Transaction ID: SA11A1.21544

Amount of Each Receipt this Period

475.00

IL Party Victory Fund

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Party of Illinois

**A.** Full Name (Last, First, Middle Initial)  
Ms. Trude S Roselle  
Mailing Address 484 Rockefeller Rd

City State Zip Code  
Lake Forest IL 60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Unemployed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 8 / 2 0 0 6

Transaction ID: SA11A1.21528

Amount of Each Receipt this Period

142.50

IL Party Victory Fund

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
Ms. Trude S Roselle  
Mailing Address 484 Rockefeller Rd

City State Zip Code  
Lake Forest IL 60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Unemployed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 6

Transaction ID: SA11A1.21529

Amount of Each Receipt this Period

142.50

IL Party Victory Fund

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
Kenneth Schmidt  
Mailing Address 1765 Robinwood Lane

City State Zip Code  
Riverwoods IL 60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Self Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 6 / 2 0 0 6

Transaction ID: SA11A1.21461

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Party of Illinois

**A.** Full Name (Last, First, Middle Initial)  
M D Paul L Winter  
Mailing Address 13140 Westview Drive

City State Zip Code  
Palos Heights IL 60463

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Doctor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 10 / 2006

Transaction ID: SA11A1.21542

Amount of Each Receipt this Period

950.00

IL Party Victory Fund

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Bernard J Ysursa  
Mailing Address 12 W Lincoln St

City State Zip Code  
Belleveille IL 62220

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 08 / 2006

Transaction ID: SA11A1.21536

Amount of Each Receipt this Period

209.00

IL Party Victory Fund

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

1750.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Democratic Party of Illinois

Full Name (Last, First, Middle Initial)

**A.** I.B.E.W. - C.O.P.E

Mailing Address 900 Seventh Street

City  
Washington

State  
DC

Zip Code  
20001

Purpose of Disbursement  
REFUND OF CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28C.21630

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	0	6

Amount of Each Disbursement this Period

4050.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4050.00

**TOTAL** This Period (last page this line number only) .....

4050.00

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 14 / 23

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) Democratic Party of Illinois		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, name the designating committee:		Full Name of Subordinate Committee	
		Mailing Address	
		City State ZIP Code	

  

Full Name (Last, First, Middle Initial) of Each Payee BTP				Purpose of Expenditure Printing		006 Category/Type	
Mailing Address 2205 Second Street				Date M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 6		Amount 116.00	
City State ZIP Code Springfield IL 62705							
Name of Federal Candidate Supported GUTIERREZ FOR CONGRESS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: IL District: 04					
Aggregate General Election Expenditure for this Candidate ▶ 229.63 Transaction ID: SF25.21608				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee BTP				Purpose of Expenditure Printing		006 Category/Type	
Mailing Address 2205 Second Street				Date M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 6		Amount 2784.00	
City State ZIP Code Springfield IL 62705							
Name of Federal Candidate Supported CITIZENS FOR MANGIERI		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: IL District: 12					
Aggregate General Election Expenditure for this Candidate ▶ 5511.12 Transaction ID: SF25.21610				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

Full Name (Last, First, Middle Initial) of Each Payee Frye-Williamson Press, Inc.				Purpose of Expenditure Printing		006 Category/Type	
Mailing Address P.O. Box 1057				Date M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 6		Amount 113.63	
City State ZIP Code Springfield IL 62705							
Name of Federal Candidate Supported GUTIERREZ FOR CONGRESS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: IL District: 04					
Aggregate General Election Expenditure for this Candidate ▶ 113.63 Transaction ID: SF25.21598				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

  

SUBTOTAL of Expenditures This Page (optional) .....		3013.63	
TOTAL This Period (last page this line number only) .....			

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 15 / 23

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) Democratic Party of Illinois		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, name the designating committee:		Full Name of Subordinate Committee	
		Mailing Address	
		City	State      ZIP Code

  

Full Name (Last, First, Middle Initial) of Each Payee Frye-Williamson Press, Inc.				Purpose of Expenditure Printing		006 Category/Type			
Mailing Address P.O. Box 1057				Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>03 / 13 / 2006</div> </div>					
City Springfield		State IL						ZIP Code 62705	
Name of Federal Candidate Supported CITIZENS FOR MANGIERI		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential						State: IL District: 12	
Aggregate General Election Expenditure for this Candidate ► 2727.12 <div style="text-align: right;">Transaction ID: SF25.21605</div>				Amount <div style="text-align: right;">2727.12</div> <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					

  

Full Name (Last, First, Middle Initial) of Each Payee Frye-Williamson Press, Inc.				Purpose of Expenditure Printing		006 Category/Type			
Mailing Address P.O. Box 1057				Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>03 / 15 / 2006</div> </div>					
City Springfield		State IL						ZIP Code 62705	
Name of Federal Candidate Supported LANE A EVANS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential						State: IL District: 17	
Aggregate General Election Expenditure for this Candidate ► 77.10 <div style="text-align: right;">Transaction ID: SF25.21615</div>				Amount <div style="text-align: right;">77.10</div> <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					

  

Full Name (Last, First, Middle Initial) of Each Payee Frye-Williamson Press, Inc.				Purpose of Expenditure Printing		006 Category/Type			
Mailing Address P.O. Box 1057				Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YY</div> <div>03 / 15 / 2006</div> </div>					
City Springfield		State IL						ZIP Code 62705	
Name of Federal Candidate Supported CITIZENS FOR MANGIERI		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential						State: IL District: 12	
Aggregate General Election Expenditure for this Candidate ► 13639.33 <div style="text-align: right;">Transaction ID: SF25.21617</div>				Amount <div style="text-align: right;">1850.21</div> <input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					

  

<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ►		4654.43
<b>TOTAL</b> This Period (last page this line number only) ..... ►		

**SCHEDULE F (FEC Form 3X)****ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 16 / 23

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) Democratic Party of Illinois		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, name the designating committee:		Full Name of Subordinate Committee	
		Mailing Address	
		City	State      ZIP Code

  

Full Name (Last, First, Middle Initial) of Each Payee Frye-Williamson Press, Inc.				Purpose of Expenditure PRINTING		006 Category/Type			
Mailing Address P.O. Box 1057				Date <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>0 3 / 1 9 / 2 0 0 6</span> </div>					
City Springfield		State IL						ZIP Code 62705	
Name of Federal Candidate Supported LANE A EVANS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential						State: IL District: 17	
Aggregate General Election Expenditure for this Candidate ▶ <span style="float: right;">125.90</span>				Amount <span style="float: right;">48.80</span>					
Transaction ID: SF25.21619				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					

  

Full Name (Last, First, Middle Initial) of Each Payee Frye-Williamson Press, Inc.				Purpose of Expenditure PRINTING		006 Category/Type			
Mailing Address P.O. Box 1057				Date <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>0 3 / 1 9 / 2 0 0 6</span> </div>					
City Springfield		State IL						ZIP Code 62705	
Name of Federal Candidate Supported COSTELLO FOR CONGRESS COMM		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential						State: IL District: 12	
Aggregate General Election Expenditure for this Candidate ▶ <span style="float: right;">62.15</span>				Amount <span style="float: right;">62.15</span>					
Transaction ID: SF25.21620				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					

  

Full Name (Last, First, Middle Initial) of Each Payee Frye-Williamson Press, Inc.				Purpose of Expenditure PRINTING		006 Category/Type			
Mailing Address P.O. Box 1057				Date <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>0 3 / 1 9 / 2 0 0 6</span> </div>					
City Springfield		State IL						ZIP Code 62705	
Name of Federal Candidate Supported CITIZENS FOR STEWART		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential						State: IL District: 12	
Aggregate General Election Expenditure for this Candidate ▶ <span style="float: right;">805.11</span>				Amount <span style="float: right;">805.11</span>					
Transaction ID: SF25.21622				<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)					

  

SUBTOTAL of Expenditures This Page (optional) .....		916.06	
TOTAL This Period (last page this line number only) .....			



**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 18 / 23  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Party of Illinois

NAME OF ACCOUNT

Democratic Party  
of Illinois

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 3 / 2 5 / 2 0 0 6

TOTAL AMOUNT TRANSFERRED

1517.87

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

1517.87

Transaction ID: H3.21591

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

1517.87

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

0.00

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred) .....

1517.87

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 19 / 23  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Party of Illinois

**A. Full Name (Last, First, Middle Initial)**

Powerplay Properties

Mailing Address

1201 Veterans Parkway

City State Zip Code

Springfield IL 62707

Purpose of Disbursement:

Utilities

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

5925.01

Date MM / DD / YYYY 03 / 03 / 2006

Transaction ID: H4.21594

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.89		22.03		25.92

**B. Full Name (Last, First, Middle Initial)**

Campaign Advisory Corporation

Mailing Address

110 W. Main Street

City State Zip Code

Urbana IL 61801-2715

Purpose of Disbursement:

Web Site Charge

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

6060.01

Date MM / DD / YYYY 03 / 08 / 2006

Transaction ID: H4.21595

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.25		114.75		135.00

**C. Full Name (Last, First, Middle Initial)**

SBC Ameritech

Mailing Address

Bill Payment Center

City State Zip Code

Chicago IL 60663

Purpose of Disbursement:

Telephone

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

6324.23

Date MM / DD / YYYY 03 / 08 / 2006

Transaction ID: H4.21596

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.63		224.59		264.22

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
63.77		361.37		425.14

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 20 / 23  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Party of Illinois

**A. Full Name (Last, First, Middle Initial)**  
Americall Communications

Mailing Address

Bill payment center

 City State Zip Code  
Springfield IL 62704

 Purpose of Disbursement:  
Maintenance billing
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

6657.23

 Date M M / D D / Y Y Y Y  
0 3 / 0 8 / 2 0 0 6

Transaction ID: H4.21625

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
49.95		283.05		333.00

**B. Full Name (Last, First, Middle Initial)**  
Sheraton Chicago Hotel and Towers

Mailing Address

301 East North Water Street

 City State Zip Code  
Chicago IL 60611

 Purpose of Disbursement:  
Deposit for 09-26-06 event
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

8157.23

 Date M M / D D / Y Y Y Y  
0 3 / 1 3 / 2 0 0 6

Transaction ID: H4.21607

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
225.00		1275.00		1500.00

**C. Full Name (Last, First, Middle Initial)**  
TTI National

Mailing Address

P.O. Box 96003

 City State Zip Code  
Charlotte NC 28296-0003

 Purpose of Disbursement:  
Telephone
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

8322.57

 Date M M / D D / Y Y Y Y  
0 3 / 1 4 / 2 0 0 6

Transaction ID: H4.21614

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.80		140.54		165.34

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
299.75		1698.59		1998.34

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 21 / 23

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Party of Illinois

**A. Full Name (Last, First, Middle Initial)**  
 Lexis Nexis

Mailing Address

P.O. Box 2314

City

State

Zip Code

Carol Stream

IL

60132-2314

Purpose of Disbursement:  
 Online service

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

8622.57

Date

M M / D D / Y Y Y Y

0 3 / 1 5 / 2 0 0 6

Transaction ID: H4.21618

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

45.00

255.00

300.00

**B. Full Name (Last, First, Middle Initial)**  
 1-800 Conference

Mailing Address

P.O. Box 5075

City

State

Zip Code

Saginaw

MI

48605

Purpose of Disbursement:  
 Conference calls

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

8904.46

Date

M M / D D / Y Y Y Y

0 3 / 2 2 / 2 0 0 6

Transaction ID: H4.21626

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

42.28

239.61

281.89

**C. Full Name (Last, First, Middle Initial)**  
 Hasler, Inc.

Mailing Address

P.O. Box 895

City

State

Zip Code

Shelton

CT

06484

Purpose of Disbursement:  
 Postage meter

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

9136.96

Date

M M / D D / Y Y Y Y

0 3 / 2 2 / 2 0 0 6

Transaction ID: H4.21627

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

34.88

197.62

232.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

122.16

692.23

814.39

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 22 / 23

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Party of Illinois

**A. Full Name (Last, First, Middle Initial)**

TTI National

Mailing Address

P.O. Box 96003

City

State

Zip Code

Charlotte

NC

28296-0003

Purpose of Disbursement:

Telephone

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

9184.82

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	2	/	2	0	0	6

Transaction ID: H4.21629

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

7.18

40.68

47.86

**B. Full Name (Last, First, Middle Initial)**

Kenny and Kenny, P.C.

Mailing Address

115 N. Oak Park Avenue

City

State

Zip Code

Oak Park

IL

60302

Purpose of Disbursement:

ACCOUNTING

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10092.70

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	7	/	2	0	0	6

Transaction ID: H4.21631

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

136.18

771.70

907.88

**C. Full Name (Last, First, Middle Initial)**

National City Bank Michigan/Illinois

Mailing Address

P.O. Box 8043

City

State

Zip Code

Royal Oak

MI

48068-8043

Purpose of Disbursement:

Check Fee

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10095.70

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	6

Transaction ID: H4.21592

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.45

2.55

3.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

143.81

814.93

958.74

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 23 / 23  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Party of Illinois

**A. Full Name (Last, First, Middle Initial)**  
 City National Bank

Mailing Address

2029 Century Park East-B Level

City	State	Zip Code
Los Angeles	CA	90067

Purpose of Disbursement:  
 Maintenance fee

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10111.70

Date 

M	M
0	3

 / 

D	D
3	1

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: H4.21593

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.40		13.60		16.00

**B. Full Name (Last, First, Middle Initial)**  
 Americall Communications

Mailing Address

Bill payment center

City	State	Zip Code
Springfield	IL	62704

Purpose of Disbursement:  
 PHONE SERVICE

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10161.70

Date 

M	M
0	3

 / 

D	D
3	1

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: H4.21632

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.50		42.50		50.00

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.90		56.10		66.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
639.39	3623.22	4262.61